

# **How a CFAC can Accomplish Statutory Requirements**

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Advocacy and Customer Service

## **CFAC's Role is Defined in Statute**

**"Advises the area authority or county program (LME) in its catchment area on the planning and management of the local public mental health, developmental disabilities and substance abuse services system".**



# BYLAWS

- Each CFAC **SHALL** adopt bylaws
  - Appointment of members (63% by CFAC),
  - Terms of Service,
  - Number of members (sub-committees),
  - Procedural matters,
    - Robert's Rules of Order and
    - Suggested Rules of Procedure.



# Membership

- Adult Consumers,
- Family Members of Consumers,
- Racial and Ethnic Composition

<http://quickfacts.census.gov/qfd>



[illegible]



# CFAC Representation in Terms of Disabilities

*All names are fictional and diagram is for demonstration purposes only*

<u><i>Mental Health</i></u>	<u><i>Developmental Disability</i></u>	<u><i>Substance Abuse</i></u>
<b>John Sandhills</b> <b>Consumer</b> <b>Term expires 10/30/07</b>	<b>Jack Johnston</b> <b>Consumer</b> <b>Term expires 10/30/07</b>	<b>Sara Neuse</b> <b>Consumer</b> <b>Term expires 10/30/07</b>
<b>VACANT</b> <b>Consumer</b> <b>Term expires 10/30/08</b>	<b>Mabel Eastpoint</b> <b>Consumer</b> <b>Term expires 10/30/08</b>	<b>Terrence Onslow</b> <b>Consumer</b> <b>Term expires 10/30/08</b>
<b>Joe Highlands</b> <b>Consumer</b> <b>Term expires 10/30/09</b>	<b>VACANT</b> <b>Consumer</b> <b>Term expires 10/30/09</b>	<b>Janice Durham</b> <b>Consumer</b> <b>Term expires 10/30/09</b>
<b>Sandy Pathways</b> <b>Family Member</b> <b>Term expires 10/30/07</b>	<b>Henry Pitt</b> <b>Family Member</b> <b>Term expires 10/30/07</b>	<b>Jerry Smoky</b> <b>Family Member</b> <b>Term expires 10/30/07</b>
<b>Theresa Wake</b> <b>Family Member</b> <b>Term expires 10/30/08</b>	<b>Clyde Catawba</b> <b>Family Member</b> <b>Term expires 10/30/08</b>	<b>VACANT</b> <b>Family Member</b> <b>Term expires 10/30/08</b>
<b>Tony Foothills</b> <b>Family Member</b> <b>Term expires 10/30/09</b>	<b>Sally Tideland</b> <b>Family Member</b> <b>Term expires 10/30/09</b>	<b>VACANT</b> <b>Family Member</b> <b>Term expires 10/30/09</b>

# ***CFAC Sub Committees***

Updated 2-11-08

<i><b>CFAC Sub-Committees</b></i>	<i><b>CFAC Members</b></i>	<i><b>Meeting Dates</b></i>	<i><b>Project Focus</b></i>
Mystery Shopper Sub-Committee			
CFAC Training Sub-Committee			
By-laws Sub-Committee			
CFAC Action Plan Sub-Committee			
Customer Service Workgroup			



# Relational Agreements

At the request of either the CFAC or the governing Board of the area authority or county program, the CFAC and the governing board **SHALL** execute an agreement that consists of:

❖ *Roles & Responsibilities*

❖ *Communication Protocol*

[www.ncdhhs.gov/mhddsas/consumeradvocacy/consumerempowermentteam/cfac-websites.htm](http://www.ncdhhs.gov/mhddsas/consumeradvocacy/consumerempowermentteam/cfac-websites.htm)

❖ *Dispute Resolution*



# Consider the 5 W's

- Who,
- What,
- When,
- Where,
- Why, and often times ask
- How.



# **#1 Review, comment on, and monitor the implementation of the local business plan.**



- **Review past LBPs.**
- **What tasks were not completed?**
- **What are the barriers, if any, to complete the LBP?**
- **Utilize current LBP when making recommendations to the LME.**
- **How will goals and objectives be met to ensure LBP outcomes?**
- **List concerns CFAC members have with the LBP.**
- **Is the LBP on the web for the community to review?**



## **#2 Identify service gaps and underserved populations.**

- **CFAC can review data on services provided in their catchment area.**
- **CFAC members need training on the interpretation of LME Data and reports.**
- **What are the Service gaps in your area?**
- **Who are the Underserved populations in your area?**
- **How can services be provided to the underserved?**



# Available DATA

- **NC Treatment Outcomes and Program Performance System**  
[nctopps.ncdmh.net](http://nctopps.ncdmh.net)
- **NC Consumer Satisfaction Survey Report (local LMEs too)**  
<http://www.ncdhhs.gov/mhddsas/statpublications/reports/consumersatis/consumersatisreport05-06.pdf>
- **Division of MH/DD/SAS Customer Service & Community Rights Data reports**

[www.ncdhhs.gov/mhddsas/statpublications/reports/index.htm](http://www.ncdhhs.gov/mhddsas/statpublications/reports/index.htm)

- **Information & Referrals**
- **Complaints**
- **Level III Incident reports**
- **Incident Reports (not level III)**
- **Investigations**





# LME Needs Assessment

## 2008 Provider Performance Contract

[www.ncdhhs.gov/mhddsas/performanceagreement/pc-sfy08dhhs-lme.pdf](http://www.ncdhhs.gov/mhddsas/performanceagreement/pc-sfy08dhhs-lme.pdf)

**“The LME shall assess community need and provider capacity on an annual basis”**

- ✓ Input from consumers, families, stakeholders,
- ✓ Cultural and linguistic competency of providers,
- ✓ Availability of providers willing to assist with community emergency response efforts, and
- ✓ Annual assessment and reporting to Board/CFAC.

### **#3 Make recommendations regarding the service array and monitor the development of additional services**



- **What are the services provided in your area?**
- **Who are all the service providers and are they listed on the web?**
- **Are there adequate providers for each disability category?**
- **What are the additional services needed for consumers?**
- **Are CFAC attending provider council meetings to assist with relationships?**
- **Use of a reporting template to make recommendations.**



# Mecklenburg County LME Benefit Plan for Mental Health

## Menu of Services

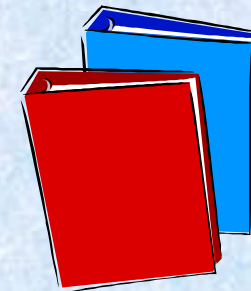
State funded, Non-Medicaid Consumers*	Medicaid Eligible Consumers**
<p>Intake Evaluation/Assessment  Crisis Services (ER, Facility Based Crisis, Mobile Crisis)  Outpatient (Individual, group or family)  Psychiatric/Medication Management  Inpatient Psychiatric Treatment  Assertive Community Treatment Team (ACTT)  Community Support (Individual or Group)  Community Support Team  Partial Hospitalization  Psychosocial Rehabilitation  Supported Employment  Supported Employment Follow Along  Transitional Living  Residential Services (group or supervised living)  Recovery Model Training  Peer Support Drop In Center  Warm Line</p>	<p>Intake Evaluation/Assessment/Diagnostic Assessment  Crisis Services (ER, Facility Based Crisis, Mobile Crisis)  Outpatient (Individual, group or family)  Psychiatric/Medication Management  Inpatient Psychiatric Treatment  Assertive Community Treatment Team (ACTT)  Community Support (Individual or Group)  Community Support Team  Partial Hospitalization  Psychosocial Rehabilitation</p>

\* State funded Non Medicaid consumers are only “entitled” to crisis services and intake evaluation/assessment; receipt of other services is dependent upon meeting target population criteria, clinical appropriateness and available funding.

\*\*Medicaid eligible consumers are only “entitled” to Medicaid service(s) if they meet medical necessity criteria for that service(s).

# Resources

- **Service Definitions can be located**  
[www.ncdhhs.gov/dma/bh/8A.pdf](http://www.ncdhhs.gov/dma/bh/8A.pdf)
- **Division of MH/DD/SAS Endorsed Provider Database**  
[www.ncdmh.net/endorsedprovider/publiclogin.htm](http://www.ncdmh.net/endorsedprovider/publiclogin.htm)
- **Person Centered Plan**  
[www.ncdhhs.gov/mhddsas/training/access-care/completepcpprotected9-26-07.doc](http://www.ncdhhs.gov/mhddsas/training/access-care/completepcpprotected9-26-07.doc)
- **Person Centered Plan Manual**  
[www.ncdhhs.gov/mhddsas/training/access-care/pcp-instruction-manual7-11-07.pdf](http://www.ncdhhs.gov/mhddsas/training/access-care/pcp-instruction-manual7-11-07.pdf)
- **Resource Guides (Natural & Community Supports)**





## Report Template

**S.L. 2006-142 states the CFAC shall undertake all of the following:**

- (1) Review, comment on, and monitor the implementation of the local business plan.**
- (2) Identify service gaps and underserved populations.**
- (3) Make recommendations regarding the service array and monitor the development of additional services.**
- (4) Review and comment on the area authority or county program budget.**
- (5) Participate in all quality improvement measures and performance indicators.**
- (6) Submit to the State Consumer and Family Advisory Committee findings and recommendations regarding ways to improve the delivery of mental health, developmental disabilities, and substance abuse services.**

**On   Date  , our CFAC reviewed data on the List the specific activity from #1-6.**  
**The following information was discussed:**

**The CFAC members believe that the findings suggest:**

**CFAC members would like to make the following recommendations:**

## **#4 Review and comment on the area authority or county program budget.**

- **Who are the appropriate LME staff responsible for educating and training our CFAC members on budget issues and concerns?**
- **When can we set up a training with staff to learn about our LME's budget?**
- **How much money is allocated for each disability category?**
- **How much money was spent on each disability category?**
- **What budget transfers have taken place this year (15% fund transfer requires CFAC signature).**
- **How much money was unspent this past fiscal year and how can we ensure more services are provided during the next fiscal year to avoid any repayment?**
- **If our LME is Single Stream Funding, are all our disability categories being provided funding/services equally?**





# Budget Resources

- LME [Annual Report](#) is a valuable tool for CFACs to utilize and reference for information pertaining to funding sources.
- LMEs communicate with their County Boards and provide a [Briefing Book](#) with valuable information.
- Some LMEs hold an annual meeting and present the fiscal year [Budget Presentation](#) to their County Commissioners, Area Board, CFAC members, etc.
- Area [Program Budget information](#) can be found [www.ncdhhs.gov/mhddsas/budget/index.htm](http://www.ncdhhs.gov/mhddsas/budget/index.htm)

Copies of these reports can be useful in generating questions/financial information to make recommendations to your LMEs.

## **#5 Participate in all quality improvement measures and performance indicators**

- **It is the role of CFAC and LME to collaboratively work together in QM**
- **Development of Monitoring Tools**
  - **Mystery Shopper,**
  - **Access Calls,**
  - **Provider Performance Measures, and**
  - **First Responder Survey.**
- **Customer Service**



## Mystery Shopper Monitoring Checklist – Version 7

Instructions: Consumer scenario will be used based on services offered. Mystery Shoppers should circle the “+” for positive experiences and the “-” for negative experiences.

Provider called \_\_\_\_\_ Phone # \_\_\_\_\_  
 Call Date \_\_\_\_\_ Call time \_\_\_\_\_  
 Type of service called about \_\_\_\_\_

Criteria	Rating		Notes
<b>Telephone Access</b>			
Less than 6 rings to pick-up	+	-	
Not placed on hold	+	-	
Time on hold less than 1 min	+	-	
Music/message on hold	+	-	
No Answer	+	-	
Call dropped/disconnected	+	-	
Answering service/machine	+	-	
Transferred to someone else	+	-	
If call was transferred, was the transferred call:	+	-	
Answered timely.	+	-	
Transferred back if not answered	+	-	
Successful or dropped	+	-	
Sent to the correct employee	+	-	
<b>Customer Service</b>	+	-	
Initial greeting clear and friendly	+	-	
Stated provider name	+	-	
Polite/professional	+	-	
Provided information	+	-	
Understandable language	+	-	
Full attention to staff	+	-	
<b>Service Access</b>	+	-	
Referred to 1-800 #	+	-	
Knowledgeable of services offered	+	-	
Appointment set for an assessment	+	-	
If unable to meet needs, referred to another agency	+	-	

Scoring Instructions:      Total + \_\_\_\_\_  
    Total - \_\_\_\_\_

Overall Experience:

**Pathways**

Date of Call: \_\_\_\_\_ Time of call: \_\_\_\_\_

Call Answered by PBH Access Center: \_\_\_\_\_ Yes \_\_\_\_\_ No

Name of PBH Access Center staff: \_\_\_\_\_ Length of Call: \_\_\_\_\_

Names of additional staff members involved with calls: \_\_\_\_\_

Call Answered by Protocol (PBH Call Center Back-up): \_\_\_\_\_ Yes \_\_\_\_\_ No

Name of Protocol staff: \_\_\_\_\_ Length of Call: \_\_\_\_\_

Names of additional staff members involved with calls: \_\_\_\_\_

Type of call: \_\_\_\_\_ Emergent \_\_\_\_\_ Urgent \_\_\_\_\_ Routine

Disability/Target Population represented during the call: \_\_\_\_\_ DD \_\_\_\_\_ SA \_\_\_\_\_ MH

Age group represented during call: \_\_\_\_\_ Adult \_\_\_\_\_ Child

Please complete the survey utilizing the following responses:

**Agree**-The element was met when there are not any issues or concerns identified with the question area. Information was provided as requested and correctly to address issues.

**Disagree**-The element was not met when there are issues or concerns identified with the question area. Information was not provided as requested or information provided was not correct to address the issues. \*For any areas scored as “Disagree”, please indicate a reason, comment, or response for the score.

The Call was answered within 30 seconds	Agree	Disagree	
Was the staff courteous and respectful?	Agree	Disagree	
Was the staff helpful?	Agree	Disagree	
Was the staff knowledgeable and able to help you with your request?	Agree	Disagree	
If you requested a referral, were you provided with choices?	Agree	Disagree	N/A

At the end of the call, please inform the staff member that this was a mystery shopping call.

Provide a brief summary of the facts/information presented during the call scenario\*: \_\_\_\_\_

\_\_\_\_\_  
\*(Refer to the attached call scenario list for details to be utilized during the call)

Please list any comments or suggestions in relation to your experience which would assist in improving the services at the Access Center. Comments must be listed for any areas marked as “disagree”.

Extremely

Un-

Not at all

Satisfied  
(100%)

Satisfied  
(75%)

Satisfied  
(25%)

Satisfied  
(0%)

Please rate your overall satisfaction with the

Way your call was handled. ....4.....3.....2.....1



# **CFAC Recommendations for First Responder**

- **Other persons may need to contact the first responder on the consumer's behalf or a consumer may lose a number given only to him, therefore it is not sufficient to give the number only to consumers. Prompts for 911 and crisis response must be part of the main agency voice prompts after hours and during business hours if no one is answering the phone in person.**
- **In a voice mail message, the first prompt should be to call 911 for a true health related emergency.**
- **The second prompt for persons currently being served should provide a phone or pager number for assistance with "urgent" or "crisis" needs that cannot wait until the next business day.**
- **If the crisis number will contact a pager, explain briefly what they will hear and how to respond.**

# Continued...

- **Give the caller a time limit within which they can expect a return call.**
- **Tell the caller what to do if they have not received a response within the specified period of time.**
- **The crisis prompt should also encourage the caller to refer to his crisis plan for additional help.**
- **Make sure the responder has direct access to the consumer's crisis plan.**
- **As a quality activity, monitor your own system periodically to make sure it is functioning properly.**

**Mecklenburg CFAC Info Share June 13, 2007**



# **MHSCC Customer Service Workgroup**

## **(Mental Health Services of Catawba County)**

**2 consumer/family members**

**1 family member that can not attend meetings but does review all documents and gives input**

**1 provider agency**

**2 LME staff**

### **DRAFT Document –Team Approach**

#### **CUSTOMER SERVICE VISION:**

**Employees and volunteers throughout the MH/DD/SA services delivery system will reflect the mission and values of MHSCC by consistently demonstrating compassion and caring in the execution of their job duties; creating a professional atmosphere of trust, dependability, responsiveness and unity, so that customers can reach their highest potential.**

# MHSCC Customer Service Goals

- Consumers feel that MHSCC MH/DD/SAS employees, providers and volunteers work to understand **customer needs**; and identify and implement the appropriate supports in a **timely and effective** manner
- Consumers feel that MHSCC MH/DD/SAS employees, providers and volunteers treat them with **fairness, respect and integrity**.
- MHSCC MH/DD/SAS employees, providers and volunteers will be responsive to **consumer concerns**, continually reassessing internal **work processes** to improve quality and/or improve timeliness.
- MHSCC MH/DD/SAS employees, providers and volunteers will work as a **team** to deliver seamless, consistent customer service by utilizing flexibility, ingenuity, creativity and innovative problem solving.
- MHSCC MH/DD/SAS employees, providers and volunteers will **speak highly of** and promote other agencies and their representatives to external and internal groups.
- Employees and volunteers from all interacting agencies feel supported in their ability to **meet customer service goals** and that they have been treated with fairness, respect and integrity by the LME



# QM Resources

- **NC Division MH/DD/SAS Assessment Criteria for Determining the Frequency of LME Monitoring of Service Providers**

[www.ncdhhs.gov/mhddsas/announce/2007/frequency-extent-monitoring-tool-122007.xls](http://www.ncdhhs.gov/mhddsas/announce/2007/frequency-extent-monitoring-tool-122007.xls)

- **How can I locate providers in my area?**

[www.ncdhhs.gov/mhddsas/lmedirectory.htm#lmeList](http://www.ncdhhs.gov/mhddsas/lmedirectory.htm#lmeList)

**#6 Submit to the State CFAC findings and recommendations regarding ways to improve the delivery of MH/DD/SA services.**

- The SCFAC requested information from each local CFAC in 2007 and produced the report found in your folder. Additional copies of the report can be obtained via their website:



[www.ncdhhs.gov/mhddsas/scfac/scfac7-07report.pdf](http://www.ncdhhs.gov/mhddsas/scfac/scfac7-07report.pdf)



# CFAC/LME Activities

- ❖ Community Forums,
- ❖ Consumer and Family Conferences,
- ❖ Crisis Service Brochure,
- ❖ Newsletter articles,
- ❖ Trainings,
- ❖ CFAC Retreats.
- ❖ Recruitment Dinner by County,
- ❖ Membership Committees,
- ❖ Orientation Manuals,
- ❖ Review of RFPs,
- ❖ Community Outreach.



# Resources

## **NC General Statute 122C-170**

[www.ncdhhs.gov/mhddsas/consumeradvocacy/consumerempowermentteam/sl2006142section5localcfacs.pdf](http://www.ncdhhs.gov/mhddsas/consumeradvocacy/consumerempowermentteam/sl2006142section5localcfacs.pdf)

## **NC Open Meeting Act**

[www.ncopengov.org/openmeetingslaw.html](http://www.ncopengov.org/openmeetingslaw.html)

## **SCFAC Bylaws**

[www.ncdhhs.gov/mhddsas/scfac/scfacbylaws7-12-07.pdf](http://www.ncdhhs.gov/mhddsas/scfac/scfacbylaws7-12-07.pdf)

## **SCFAC Rules of Procedure**

[www.ncdhhs.gov/mhddsas/scfac/scfacrulesofprocedureapproved.pdf](http://www.ncdhhs.gov/mhddsas/scfac/scfacrulesofprocedureapproved.pdf)



# More Resources....

## **SCFAC Code of Conduct**

[www.ncdhhs.gov/mhddsas/scfac/scfaccodeofconductapproved.pdf](http://www.ncdhhs.gov/mhddsas/scfac/scfaccodeofconductapproved.pdf)

## **CFAC Websites**

[www.ncdhhs.gov/mhddsas/consumeradvocacy/consumerempowermentteam/cfac-websites.htm](http://www.ncdhhs.gov/mhddsas/consumeradvocacy/consumerempowermentteam/cfac-websites.htm)

## **Local County Reports**

Look on your countie's web page and research information listed in regards to spending, budget, services provided to citizens.

# And more...

- **Free Email**
  - hotmail.com
  - Yahoo.com
- **Libraries**
  - *Free* basic Internet classes
  - Use of computers with Excel, MSWord, Access
- **Community Colleges and Universities**
  - Resource connection



# Thank you!

## ***Advocacy and Customer Services Information***

<http://www.ncdhhs.gov/mhddsas/consumeradvocacy/index.htm>

**(919) 715-3197**

Please send Questions and Comments to  
[catherine.kocian@ncmail.net](mailto:catherine.kocian@ncmail.net)